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|---|----------------------|--|--|--|-------|---------|-------------|
| No. C 139086 | | Due no later than May 31, 2014 Annual Report Form | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. ALTERNATIVE FUEL INJECTION, INC. MICHAEL F FEYEREISEN 3718 NEWBY ST #112 NAMPA ID 83687 USA | | MICHAEL FEYEREISEN 3718 NEWBY ST #112 NAMPA ID 83687 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional). | | | | | | | |
| Office Held | Name | Street or PO Address | | City | State | Country | Postal Code |
| PRESIDENT | MICHAEL F FEYEREISEN | 3718 NEWBY ST #112 | | NAMPA | ID | USA | 83687 |
| 5. Organized Under the Laws of: ID C 139086 | | 6. Annual Report must be signed.* Signature: Michael Feyereisen Name (type or print): Michael Feyereisen | | | | | |
| | | Date: 05/23/2014 Title: President | | | | | |
| Processed 05/23/2014 * Electronically provided signatures are accepted as original signatures. | | | | | | | |